

105TH CONGRESS
1ST SESSION

H. R. 1427

To assist in implementing the Plan of Action adopted by the World Summit
for Children.

IN THE HOUSE OF REPRESENTATIVES

APRIL 23, 1997

Mr. WALSH (for himself, Mr. HALL of Ohio, Mr. HOUGHTON, Mr. OBERSTAR, Mr. BOEHLERT, Ms. SLAUGHTER, Mr. McDERMOTT, Mr. FRANK of Massachusetts, Mrs. MORELLA, Mrs. MEEK of Florida, Mr. BARRETT of Wisconsin, Mr. FILNER, Ms. PRYCE of Ohio, Ms. LOFGREN, Mr. GREEN, Mr. JEFFERSON, Mr. TORRES, Mr. ABERCROMBIE, Mr. DAVIS of Illinois, Mr. ANDREWS, Mr. DELLUMS, Ms. RIVERS, Mr. LEVIN, Mr. MCGOVERN, Mr. BROWN of Ohio, Mrs. MALONEY of New York, Mr. NADLER, Mr. CAPPS, Mr. LEWIS of Georgia, Mrs. TAUSCHER, Ms. DEGETTE, and Mr. YOUNG of Alaska) introduced the following bill; which was referred to the Committee on International Relations

A BILL

To assist in implementing the Plan of Action adopted by
the World Summit for Children.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “James P. Grant World
5 Summit for Children Implementation Act of 1997”.

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) FINDINGS.—The Congress finds the following:

3 (1) The World Summit for Children held in
4 1990, the largest gathering of heads of state and
5 heads of government up until that time, united the
6 world in a commitment to protect the lives of chil-
7 dren, diminish their suffering, and enhance their fu-
8 tures.

9 (2) This commitment is reflected in specific
10 goals set forth in the Declaration and Plan of Action
11 of the 1990 World Summit for Children that require
12 international cooperation and the commitment of all
13 nations, goals which were endorsed in the World
14 Declaration on Nutrition adopted at the 1992 Inter-
15 national Conference on Nutrition and endorsed at
16 the 1994 Summit of the Americas and at the 1995
17 World Summit on Social Development.

18 (3) The United Nations Children's Fund
19 (UNICEF) estimates that these goals could be im-
20 plemented by the year 2000 with a global commit-
21 ment of just \$40,000,000,000 annually, to be
22 achieved through reallocation of resources to in-
23 crease the proportion of resources going to meet
24 basic human needs, with two-thirds of those re-
25 sources coming from the developing nations them-
26 selves and one-third from the industrialized nations.

1 (4) In 1994 UNICEF estimated that only 10
2 percent of developing country budgets and less than
3 12 percent of bilateral United States development
4 assistance was devoted to meeting basic human
5 needs, as defined by the United Nations Develop-
6 ment Program in their 1994 Human Development
7 Report.

8 (5) If that proportion of developing country
9 budgets and international development assistance
10 devoted to basic needs were increased to just 20 per-
11 cent, through reallocation of current resources and
12 without requiring additional resources, this would
13 provide the resources UNICEF estimates is required
14 annually to achieve by the year 2000 the goals of
15 the World Summit for Children.

16 (6) The United States share of these resources
17 can be realized through a reallocation of bilateral
18 United States development assistance by increasing
19 the percentage of such development assistance to at
20 least 20 percent of the United States foreign assist-
21 ance budget without an overall increase in such for-
22 eign assistance budget.

23 (7) The United States Government participated
24 in the World Summit for Children and signed the

1 Declaration and Plan of Action adopted at that
2 Summit.

3 (8) Participants in the Summit committed
4 themselves and their governments to take steps to
5 ensure that child survival, protection, and develop-
6 ment programs will have a priority in the allocation
7 of resources.

8 (9) The United States Government should im-
9 plement a plan of action to fulfill its commitment to
10 children, both at home and abroad.

11 (b) PURPOSES.—The purposes of this Act are—

12 (1) to help define a plan of action to fulfill the
13 commitment of the United States Government to
14 children; and

15 (2) to provide the necessary authorities to im-
16 plement that plan of action.

17 **SEC. 3. INTERNATIONAL INFANT AND CHILD MORTALITY.**

18 (a) FINDINGS.—The Congress finds the following:

19 (1) During the period 1984 to 1994 the inter-
20 national campaign to save the lives of children has
21 resulted in dramatic increases in the adoption of
22 low-cost measures to save children's lives, such as
23 immunizations and oral rehydration therapy.

24 (2) In September 1991, the United Nations
25 Children's Fund (UNICEF) and the World Health

1 Organization were able to report that the goal of 80
2 percent universal childhood immunization had been
3 achieved, saving over 12,000,000 young lives during
4 the 1980's, and continuing to save over 3,000,000
5 children's lives each year.

6 (3) The Plan of Action adopted by the World
7 Summit for Children calls for the reduction of
8 under-5 mortality rates by at least one-third by the
9 year 2000, and halving moderate and severe mal-
10 nutrition among children under 5.

11 (4) Such progress will be possible with a contin-
12 ued focus on child survival activities that utilize sim-
13 ple, available technologies that have proven to be di-
14 rectly effective in saving children's lives and with a
15 particular focus on assistance to countries and re-
16 gions with the highest rates of child mortality.

17 (5) Both UNICEF and the United States
18 Agency for International Development have provided
19 strong leadership as well as financial and technical
20 support for these goals.

21 (6) Child survival programs implemented by
22 United States-based private voluntary organizations
23 and other nongovernmental organizations are docu-
24 mented to be extremely effective in reducing child
25 mortality, in reaching the very poor at the commu-

1 nity level, and in achieving long-term improvements
2 in immunization, child health, and nutrition.

3 (7) According to a University of Maryland na-
4 tionwide poll of the attitudes of the American public
5 on foreign assistance, an overwhelming majority of
6 Americans embrace the principle that the United
7 States should give assistance to help people in for-
8 eign countries who are in genuine need, and a ma-
9 jority of Americans want an increased priority on
10 helping the poor and needy.

11 (8)(A) Private voluntary organizations imple-
12 menting child survival projects leverage significant
13 amounts of private resources, a minimum of 25 per-
14 cent, to match public funds.

15 (B) However, United States child survival fund-
16 ing to private voluntary organizations has remained
17 essentially unchanged since 1985, although overall
18 child survival funding has expanded significantly, de-
19 spite the support of the American public for activi-
20 ties of private voluntary organizations and the in-
21 creased technical ability of such organizations to
22 carry out their programs and to effectively utilize
23 funding.

24 (b) CONTRIBUTIONS TO UNICEF.—To carry out sec-
25 tion 301 of the Foreign Assistance Act of 1961 (22 U.S.C.

1 2221; relating to voluntary contributions to international
 2 organizations and programs), there are authorized to be
 3 appropriated \$100,000,000 for fiscal year 1998 and
 4 \$110,000,000 for fiscal year 1999 for contributions to the
 5 United Nations Children’s Fund (UNICEF) for activities
 6 to promote child health and other assistance programs on
 7 behalf of children.

8 (c) CHILD SURVIVAL ACTIVITIES.—Section 104(c)(2)
 9 of the Foreign Assistance Act of 1961 (22 U.S.C.
 10 2151b(c)(2); relating to the Child Survival Fund) is
 11 amended—

12 (1) in subparagraph (B), by striking
 13 “\$25,000,000 for fiscal year 1986 and \$75,000,000
 14 for fiscal year 1987” and inserting “\$180,000,000
 15 for fiscal year 1998 and \$210,000,000 for fiscal
 16 year 1999”; and

17 (2) by inserting after subparagraph (C) the fol-
 18 lowing new subparagraphs:

19 “(D)(i)(I) Subject to clauses (ii) and (iii), of the ag-
 20 gregate of the amounts made available to carry out sub-
 21 paragraph (B) of this paragraph, sections 103(a) and sec-
 22 tion 106 of this chapter, chapter 10 of this part, and chap-
 23 ter 4 of part II and for the Multilateral Assistance Initia-
 24 tive for the Philippines, not less than \$350,000,000 for
 25 fiscal year 1998 and not less than \$380,000,000 for fiscal

1 year 1999 shall be available only for simple technologies
2 of the kind described in subparagraph (A). These funds
3 shall be used only for activities which have a direct meas-
4 urable impact on the reduction in the rates of child death
5 and disease, focusing on the poor in communities with a
6 particular emphasis on delivery of community-based pri-
7 mary health care and health education services.

8 “(II) Such activities shall primarily be limited to the
9 direct provision of basic health services, such as improved
10 and expanded immunization programs, oral rehydration to
11 combat diarrhoeal diseases, and health education pro-
12 grams aimed at improving nutrition and sanitation and
13 at promoting child spacing, which have a direct measur-
14 able impact on the rates of child death and disease, focus-
15 ing on the poor in communities with a particular emphasis
16 on delivery of community-based primary health care. Only
17 on an exceptional basis shall such amounts be used for
18 purposes other than the direct provision of basic health
19 services.

20 “(ii) Of the amounts made available under clause (i)
21 for activities described in subparagraph (A), not less than
22 \$40,000,000 for fiscal year 1998 and not less than
23 \$60,000,000 for fiscal year 1999 shall be provided to pri-
24 vate and voluntary organizations under the PVO Child

1 Survival grants program carried out by the United States
2 Agency for International Development.

3 “(iii) Amounts made available under section 103(h)
4 of this chapter (relating to the Vitamin A Deficiency Pro-
5 gram), part I of this Act for iodine and iron fortification
6 programs and for iron supplementation programs for
7 pregnant women, chapter 9 of this part (relating to inter-
8 national disaster assistance), section 104(c)(4) of this
9 chapter (relating to international AIDS prevention and
10 control), and any other provision of law for migration and
11 refugee assistance, shall not be included in the aggregate
12 amounts described in clause (i) for purposes of the re-
13 quirements contained in such clause.

14 “(E) The President shall include in the annual budg-
15 et submitted to the Congress an estimate of the impact
16 of each program, project, or activity carried out under
17 subparagraph (D)(i), and under the vitamin A and micro-
18 nutrient deficiency program, on the rates of child death
19 and disease, including an assessment of the actual impact
20 of each such program. In formulating such estimates, the
21 President may make use of data on intermediate measures
22 such as immunization coverage rates and prevalence of
23 oral rehydration use.”.

24 (d) REPORT.—Not later than June 30, 1997, the Ad-
25 ministrator of the United States Agency for International

1 Development shall prepare and submit to the Congress a
2 report on the progress to significantly increase the level
3 of funding to private and voluntary organizations conduct-
4 ing community-based child survival programs.

5 **SEC. 4. GLOBAL MALNUTRITION.**

6 (a) FINDINGS.—The Congress finds the following:

7 (1) Malnutrition is a preventable, underlying
8 cause of a high proportion of child deaths.

9 (2) The Plan of Action adopted at the World
10 Summit for Children calls for reducing by 50 per-
11 cent severe and moderate malnutrition among chil-
12 dren under 5 years of age by the year 2000.

13 (3) The Congress has already undertaken sub-
14 stantial action to address this problem in the Food,
15 Agriculture, Conservation, and Trade Act of 1990,
16 which established food security for the poorest and
17 the prevention of malnutrition as priorities in food
18 assistance programs administered by the United
19 States Agency for International Development under
20 the Agriculture Trade Development and Assistance
21 Act of 1954.

22 (4) Section 411 of the Agricultural Trade De-
23 velopment and Assistance Act of 1954 (7 U.S.C.
24 1736e), as amended by the Food, Agriculture, Con-
25 servation, and Trade Act of 1990, authorizes the

1 forgiveness of Public Law 480 debt owed by least
2 developed countries that are pursuing national eco-
3 nomic policy reforms that would promote long-term
4 economic development, but the exercise of that au-
5 thority requires further action by the Congress in an
6 appropriations Act.

7 (5) Child survival activities provide an effective,
8 integrated approach to battling the complex problem
9 of childhood malnutrition leading to mortality and
10 must be pursued alongside efforts to ensure food se-
11 curity.

12 (6)(A) Vitamin A deficiency is a scourge of ap-
13 proximately a quarter of a billion children in devel-
14 oping countries.

15 (B) Research financed by the United States
16 Agency for International Development and other do-
17 nors has convincingly demonstrated that vitamin A
18 supplementation and fortification can reduce child-
19 hood mortality by 30 percent or more.

20 (C) An estimated 20,000,000 children are likely
21 to die and 3,500,000 children are likely to go blind
22 in the next decade if access to vitamin A is not
23 available.

1 (D) The World Bank has estimated that vita-
2 min A supplementation only costs approximately \$9
3 for every life year saved adjusted for disability.

4 (E) A single capsule of vitamin A costs only
5 five cents.

6 (7) Preventing key micronutrient deficiencies of
7 vitamin A, iodine, iron, and zinc is a low-cost, prac-
8 tical, and effective approach to building human ca-
9 pacity, quality of life, and protecting the future for
10 billions of people throughout the world.

11 (8)(A) Today 1,600,000,000 people are at risk
12 of iodine deficiency disorders, with the fetus and in-
13 fant being most vulnerable to permanent brain dam-
14 age.

15 (B) Iodine deficiency is the most prevalent
16 cause of mental retardation worldwide.

17 (C) Iodizing salt can go far in preventing this
18 tragedy and therefore will enhance the intellectual
19 and economic performance of future generations.

20 (D) The World Bank estimates that it only
21 costs \$8 for every year of life saved adjusted for dis-
22 ability.

23 (9)(A) Nearly 2,000,000,000 people are iron
24 deficient, particularly women of childbearing age and

1 young children, approximately 1,000,000,000 of
2 whom suffer from anemia.

3 (B) Iron deficiency anemia during pregnancy
4 can increase the risk of both maternal and infant
5 mortality.

6 (C) Moreover, iron deficiency can hinder learn-
7 ing among school-age children and work productivity
8 among adults.

9 (D) The World Bank has estimated that iron
10 supplementation costs only \$4 to \$13 for every year
11 of life saved adjusted for disability.

12 (10) Vitamin A deficiencies and iodine defi-
13 ciencies could be virtually eliminated, and iron defi-
14 ciency anemia reduced by one-third, by the first dec-
15 ade of the 21st century.

16 (b) PUBLIC LAW 480 DEBT AUTHORITY.—It is the
17 sense of the Congress that authority, in such amounts as
18 may be required, should be granted to the President in
19 an appropriations Act to exercise the debt authority with
20 respect to least developed countries that is provided in sec-
21 tion 411 of the Agricultural Trade Development and As-
22 sistance Act of 1954.

23 (c) VITAMIN A DEFICIENCY PROGRAM.—Section 103
24 of the Foreign Assistance Act of 1961 (22 U.S.C. 2151a;
25 relating to development assistance for agriculture, rural

1 development, and nutrition) is amended by adding at the
 2 end the following new subsection:

3 “(h) VITAMIN A DEFICIENCY PROGRAM.—Of the
 4 amounts made available to carry out this section, not less
 5 than \$17,000,000 for fiscal year 1998 and not less than
 6 \$20,000,000 for fiscal year 1999 shall be available only
 7 for implementing Vitamin A deficiency prevention strate-
 8 gies, especially supplementation and fortification pro-
 9 grams.”.

10 (d) OTHER MICRONUTRIENT DEFICIENCIES.—In ad-
 11 dition to amounts otherwise available for such programs,
 12 there are authorized to be appropriated \$13,000,000 for
 13 fiscal year 1998 and \$15,000,000 for fiscal year 1999 for
 14 iodine and iron deficiency prevention programs, especially
 15 fortification and supplementation programs, with particu-
 16 lar emphasis on alleviating deficiencies in pregnant
 17 women.

18 **SEC. 5. MATERNAL AND CHILD MORTALITY RESULTING**
 19 **FROM AIDS.**

20 (a) FINDINGS.—The Congress finds the following:

21 (1) As of 1992, nearly 5,000,000 women of
 22 childbearing age and over 1,000,000 children were
 23 infected with the human immunodeficiency virus
 24 (HIV), the virus that causes the acquired immune
 25 deficiency syndrome (AIDS). The vast majority of

1 these women and children live in developing coun-
2 tries.

3 (2) The maternal and child mortality rate in
4 many developing countries will increase dramatically
5 until HIV/AIDS prevention and control efforts are
6 successful, as will the number of orphans with HIV/
7 AIDS.

8 (3) The most effective efforts to respond to
9 HIV/AIDS are based at the community level and in-
10 volve nongovernmental organizations as well as gov-
11 ernment agencies.

12 (4) The United States Agency for International
13 Development should expand its assistance to devel-
14 oping countries for community-based prevention,
15 care, and control programs and activities relating to
16 HIV/AIDS, and should participate in coordinated ef-
17 forts with other donors.

18 (5) Coordination of efforts of bilateral, multilat-
19 eral, and nongovernmental agencies and organiza-
20 tions is essential.

21 (b) INTERNATIONAL AIDS PREVENTION AND CON-
22 TROL FUND.—Section 104(c) of the Foreign Assistance
23 Act of 1961 (22 U.S.C. 2151b(c); relating to development
24 assistance for health related activities) is amended by add-
25 ing at the end the following new paragraph:

1 “(4)(A) In carrying out this subsection, the President
 2 shall promote, encourage, and undertake community-based
 3 prevention and control programs and activities relating to
 4 the human immunodeficiency virus (HIV) and acquired
 5 immune deficiency syndrome (AIDS) in developing coun-
 6 tries.

7 “(B) There are authorized to be appropriated
 8 \$140,000,000 for fiscal year 1998 and \$150,000,000 for
 9 fiscal year 1999 for use in carrying out this paragraph,
 10 which shall be in addition to amounts made available
 11 under subsection (g) or otherwise available for such pur-
 12 pose. Amounts appropriated under this subparagraph are
 13 authorized to remain available until expended.

14 “(C) Appropriations pursuant to subparagraph (B)
 15 may be referred to as the ‘International AIDS Prevention
 16 and Control Fund’.”.

17 **SEC. 6. INTERNATIONAL BASIC EDUCATION.**

18 (a) FINDINGS.—The Congress finds the following:

19 (1) Primary education, early childhood develop-
 20 ment activities, and programs to achieve literacy, are
 21 essential for increasing the productive capacity of
 22 people and their ability to earn income.

23 (2) Basic education, usually defined as early
 24 childhood education, primary and lower secondary
 25 schooling, as well as adult literacy, has been shown

1 to be one of the most economically productive invest-
2 ments that can be made.

3 (3)(A) In addition to direct economic benefits,
4 basic education has numerous beneficial social im-
5 pacts.

6 (B) Widespread education leads to more equi-
7 table income distribution and ultimately, to political
8 stability.

9 (C) Countries in which large numbers of chil-
10 dren enter secondary schools have lower levels of in-
11 vestment risk, as measured by the World Bank, and
12 higher levels of democratic rights, as measured by
13 the Freedom House Index.

14 (4)(A) More than 100,000,000 school-aged chil-
15 dren, the majority of them girls, are not enrolled in
16 primary school.

17 (B) Basic education, especially basic education
18 for girls, contributes to increased child survival,
19 overall life expectancy, and lower birth rates.

20 (C) Throughout the developing world, women
21 with more education desire smaller families.

22 (D) Education of young women dramatically
23 enhances the survival of the children of such women.

1 (E) It is estimated that every additional year of
 2 schooling for girls lowers child death rates by 5 to
 3 10 percent.

4 (5) The Plan of Action adopted by the World
 5 Summit for Children calls for basic education for all
 6 children and for completion of primary education by
 7 at least 80 percent of all children.

8 (6) While it is clear that investments in edu-
 9 cation are a prerequisite for development, United
 10 States assistance for basic education in developing
 11 countries has accounted for less than 2 percent of
 12 United States foreign assistance in recent years.

13 (b) INTERNATIONAL BASIC EDUCATION.—Section
 14 105 of the Foreign Assistance Act of 1961 (22 U.S.C.
 15 2151c; relating to development assistance for education
 16 and human resource development) is amended by adding
 17 at the end the following new subsection:

18 “(c) BASIC EDUCATION.—(1)(A) Of the aggregate of
 19 the amounts made available to carry out this section,
 20 chapter 10 of this part, and chapter 4 of part II and for
 21 the Multilateral Assistance Initiative for the Philippines,
 22 not less than \$120,000,000 for fiscal year 1998 and not
 23 less than \$140,000,000 for fiscal year 1999 shall be avail-
 24 able only for programs in support of basic education ac-
 25 tivities described in subparagraph (B).

1 “(B) The basic education activities described in this
 2 subparagraph are early childhood education, primary and
 3 lower secondary education, and literacy training for
 4 adults.

5 “(C) Amounts made available under this paragraph
 6 may be used only for activities that have a direct and
 7 measurable impact on primary school enrollment, literacy,
 8 or educational attainment.

9 “(2) The President shall include in the annual budget
 10 submitted to the Congress a description of the measured
 11 or estimated impact on primary school enrollment, lit-
 12 eracy, and educational attainment of each project or pro-
 13 gram carried out under this subsection.”.

14 **SEC. 7. INTERNATIONAL FAMILY PLANNING AND CHILD**
 15 **SPACING.**

16 (a) FINDINGS.—The Congress finds the following:

17 (1) Universal access to voluntary family plan-
 18 ning could save the lives of several million children
 19 each year and could significantly improve the health
 20 of children throughout the developing world by re-
 21 ducing prematurity and low birthweight and allowing
 22 longer breastfeeding.

23 (2) The risk of maternal death or illness in the
 24 developing world is highest for women who bear chil-
 25 dren when they are under the age of 18 or over the

1 age of 35, for pregnancies spaced less than 2 years
2 apart, and for women who already have 4 or more
3 children. Universal access to voluntary family plan-
4 ning could prevent up to one-third of the 585,000
5 maternal deaths annually.

6 (3) The inability of couples to plan births de-
7 creases the quality of women's lives and undermines
8 their opportunities for education, for earning in-
9 come, for improving the care of children, and for
10 community activities and personal development.

11 (4) Rapid world population growth, combined
12 with unsustainable patterns of natural resource con-
13 sumption, has become an urgent economic, social,
14 and environmental problem.

15 (5) The Plan of Action adopted at the 1990
16 World Summit for Children calls for voluntary fam-
17 ily planning services and education to be made avail-
18 able to all couples to empower them to prevent un-
19 wanted pregnancies and births which are "too many
20 and too close" and to women who are "too young or
21 too old".

22 (6) Efforts to reduce child death rates and to
23 lower birthrates are mutually reinforcing because
24 closely-spaced pregnancies contribute in important

1 ways to high child mortality and parents need assur-
2 ances that their children will survive.

3 (b) AUTHORIZATIONS OF APPROPRIATIONS.—In ad-
4 dition to any other amounts made available for such pur-
5 poses, there are authorized to be appropriated to the
6 President for United States population assistance pro-
7 grams and activities under part I of the Foreign Assist-
8 ance Act of 1961 not less than \$550,000,000 for fiscal
9 year 1998 and not less than \$600,000,000 for fiscal year
10 1999.

11 **SEC. 8. REFUGEES.**

12 (a) FINDINGS.—The Congress finds the following:

13 (1) In 1997, there are more than 27,000,000
14 people of concern in refugee-like situations in areas
15 from Northern Iraq, Angola, to the former Yugo-
16 slavia, and, in addition, there are estimated to be
17 more than 20,000,000 internally-displaced persons.
18 A large majority of these refugees and internally dis-
19 placed persons are children.

20 (2) The dramatic growth in the number of refu-
21 gees and displaced persons has resulted in the in-
22 creased need for legal assistance and protection,
23 health, nutrition, and basic education services avail-
24 able to such refugees and displaced persons.

1 (3) Refugee children are particularly vulnerable
2 in first asylum camps from Africa to Southeast Asia,
3 particularly unaccompanied children who languish
4 without the protection and nurturing of a parent or
5 adult guardian.

6 (4) At least 12 major repatriation programs are
7 currently in operation worldwide and such programs
8 will be successful in promoting regional stability only
9 if adequate funding is appropriated for reintegration.
10 tion.

11 (b) FUNDING FOR REFUGEE ASSISTANCE PRO-
12 GRAMS.—It is the sense of the Congress that—

13 (1) not less than \$730,000,000 for fiscal year
14 1998 and \$780,000,000 for fiscal year 1999 should
15 be appropriated for the “Migration and Refugee As-
16 sistance” account, of which not less than
17 \$470,000,000 for fiscal year 1998 and
18 \$500,000,000 for fiscal year 1999 should be avail-
19 able only for programs of refugee assistance overseas
20 (in addition to the amounts available for programs
21 for refugees from the former Soviet Union, Eastern
22 Europe, and elsewhere who resettle in Israel); and

23 (2) not less than \$100,000,000 for each of the
24 fiscal years 1998 and 1999 should be appropriated

1 for the “United States Emergency Refugee and Mi-
2 gration Assistance Fund” account.

3 **SEC. 9. TUBERCULOSIS.**

4 (a) FINDINGS.—The Congress finds the following:

5 (1) It is estimated that 15,000,000 individuals
6 in the United States are infected with tuberculosis.

7 (2) The threat to the health of Americans with
8 respect to tuberculosis consists of—

9 (A) the global spread of tuberculosis in
10 general, including its resurgence in the United
11 States; and

12 (B) the emergence and spread of strains of
13 tuberculosis that are multi-drug resistant.

14 (3)(A) Elimination of tuberculosis in the United
15 States can only be achieved by controlling the dis-
16 ease in developing countries.

17 (B) Tuberculosis is spreading as a result of in-
18 adequate treatment and it is a disease that knows
19 no national borders.

20 (4)(A) Tuberculosis is an infectious disease that
21 kills an estimated 3,000,000 people each year world-
22 wide.

23 (B) Tuberculosis is the largest infectious killer
24 of adults, causing more deaths than AIDS, cholera,

1 malaria, tetanus, meningitis, and typhoid fever com-
2 bined.

3 (C) Most cases of tuberculosis and deaths
4 caused by tuberculosis occur among individuals in
5 their most productive years of life.

6 (5)(A) Children bear the brunt of the tuber-
7 culosis of their parents.

8 (B) No other infectious disease creates as many
9 orphans as tuberculosis.

10 (C) Nearly 170,000 children die of tuberculosis
11 annually because of infection usually by an adult
12 family member.

13 (D) Children under the age of two are espe-
14 cially susceptible to deadly strains of the disease.

15 (E) In addition, children suffer the results of
16 the inability of their parents and grandparents to
17 work and care for their families.

18 (F) In the United States, the number of chil-
19 dren under the age of 15 who were sick with tuber-
20 culosis increased by 35 percent between 1985 and
21 1992.

22 (6)(A) The World Health Organization has
23 stated that the best curative method for tuberculosis
24 is known as Directly Observed Treatment, Short
25 Course (“DOTS”), in which health workers directly

1 monitor patients with tuberculosis for the purpose of
2 ensuring that such patients take their full course of
3 medicine.

4 (B) By guaranteeing that the treatment regi-
5 mens are completed, DOTS prevents the further
6 spread of infection and development of strains of tu-
7 berculosis that are multi-drug resistant.

8 (7)(A) Few public health expenditures provide
9 so much value for so little money as expenditures for
10 the prevention and treatment of tuberculosis.

11 (B) In some parts of the world, the cost of cur-
12 ing tuberculosis is as little as 90 cents for every year
13 added to the life of the patient.

14 (C) Drugs for the treatment of tuberculosis cost
15 as little as \$11 per person in some parts of the
16 world and such drugs are more than 95 percent ef-
17 fective.

18 (D) According to the World Bank, the control
19 of tuberculosis is among the most cost-effective of all
20 health interventions.

21 (8) In order to control tuberculosis in the Unit-
22 ed States in a more effective manner, it is also nec-
23 essary to ensure the effectiveness of tuberculosis
24 control programs worldwide.

1 (9) There is a need for an increased number of
2 trained professionals to set up model programs in
3 developing countries, as well as a need for drugs,
4 other staff costs, and equipment.

5 (10)(A) In addition to the World Health Organi-
6 zation through its tuberculosis program, nongovern-
7 mental organizations, such as the International
8 Union Against Tuberculosis and Lung Disease have
9 proven expertise in the field.

10 (B) Increased support for such nongovern-
11 mental partners is critical for the expansion of effec-
12 tive tuberculosis control programs.

13 (11) Setting aside funding to monitor the inci-
14 dence and spread of tuberculosis worldwide is crucial
15 to successfully combatting the disease.

16 (b) FUNDING FOR THE CONTROL OF TUBER-
17 CULOSIS.—There are authorized to be appropriated
18 \$40,000,000 for fiscal year 1998 and \$50,000,000 for fis-
19 cal year 1999 for the prevention of the global spread of
20 tuberculosis through the provision in developing countries
21 of drugs, local staff costs and staff training and equip-
22 ment, particularly in those developing countries with the
23 highest incidence of tuberculosis.

1 **SEC. 10. EFFORTS BY OTHER COUNTRIES.**

2 The President shall call upon the governments of
3 other countries to provide their share of the resources re-
4 quired to achieve the World Summit for Children goals
5 by the year 2000, specifically through giving highest prior-
6 ity to increasing the proportion of public expenditures and
7 foreign assistance devoted to priority human needs areas
8 outlined in the Declaration and Plan of Action of the
9 World Summit for Children.

10 **SEC. 11. ANNUAL REPORT.**

11 (a) REQUIREMENT FOR REPORT.—In order that the
12 Congress and the people of the United States may be fully
13 informed of efforts undertaken by the United States Gov-
14 ernment to fulfill agreements signed by the United States
15 at the World Summit for Children, the President shall re-
16 port annually to the Congress on United States contribu-
17 tions to the achievement of the goals of the World Summit
18 for Children. Each such report should include—

19 (1) a discussion of efforts by the United States
20 to achieve those goals both within the United States
21 and in other countries; and

22 (2) a comparative analysis of current and past
23 funding levels and planned funding levels for the
24 next 2 fiscal years.

1 (b) SUBMISSION DATE.—The reports required by this
2 section shall be submitted to the Congress not later than
3 February 1 of each year.

